Wisconsin Functional Screen

Technical Assistance Document

ISSUE DATE: 6/23/2006

TOPIC: Obtaining Access to the Functional Screen Information Access Application

Obtaining Access to the Functional Screen Information Access Application

The Functional Screen Information Access (FSIA) application is accessed by clicking on the *Functional Screen* link contained on the page located at https://www.dwd.state.wi.us/desltc/.



Functional Screen Information Access

Wisconsin's Functional Screen system is a Web-based application that collects information about an individual's functional status, health and need for assistance for various adult and children's programs. The screen is used to determine functional eligibility for certain mental health services, adult long-term care programs and children's long-term care programs. It is also used for care options counseling and pre-admission counseling.

Experienced professionals, usually social workers, registered nurses or mental health professionals, are able to access through a logon identification code and password and administer the protected screening tool.

Any information collected for the screen or during the screening process is confidential. Upon completion of the screen, the screener can instantly access the person's functional eligibility results as calculated by the electronic screen.

Screeners must meet the training and certification qualifications as prescribed by the Department of Health and Family Services before they can gain access to the screening tool.

Functional Screen

Last Revised: May 15, 2004



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Wisconsin Department of Health and Family Services



Application Security

The actions a user is able to take inside the application is dependent on the user's security profile and agency. In short, the security profile determines what abilities the user has, and the user's agency determines which applicants the user can perform those abilities on.

The Functional Screen link will take you to the log-in screen.

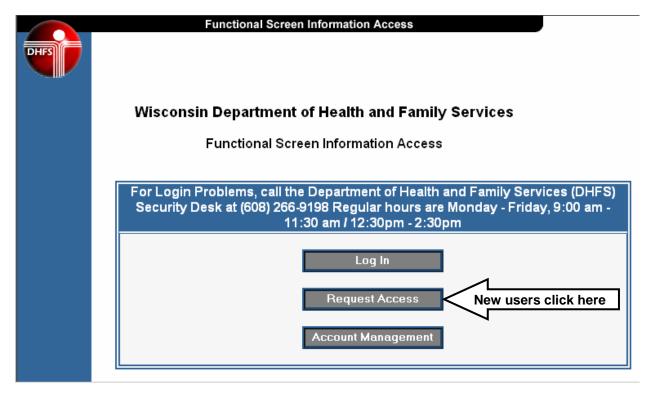


Note

The following process is for setting up both a DWD/Wisconsin Logon ID and obtaining access to the Functional Screen Information Access application. If you already have a DWD/Wisconsin Logon ID, please proceed to page 9.

If you are unsure whether you have a DWD/Wisconsin Logon ID, please contact the DHFS Security Desk at (608) 266-9198.

Initially, workers will need to create a User ID and password using the *Request Access* button found on the log-in screen. All new users must create an account before they can log into the application.



After clicking on the *Request Access* button, the page below will be displayed. The first step to gaining access to the application is to create a DWD/Wisconsin Logon ID. To do so, click on the link in Step 1.

Please follow the instructions below to obtain, delete, or change access to the Functional Screen Information Access application

- 1. You must have a DWD/Wisconsin Logon and password. If you have not yet created a DWD/Wisconsin Logon, you will need to do so now. Click here Click on this link DWD/Wisconsin Logon.
- 2. Click on the "Functional Screen Account Request Form" link below to access the Functional Screen Web Access Request Form. After you fill out a series of questions on a Web page, your responses will be automatically transferred to the required form which must be printed from your Web browser. While this Web page will help you complete this form quickly and accurately, please note that your completed form will **not** be transmitted through the Web.

This will take you to the DWD/Wisconsin Logon Management System Home Page (shown below). Here you will need to click on the *Self-Registration* link.



state agencies

subject directory

Wisconsin Department of Workforce Development



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DWD/Wisconsin Logon Management System

The DWD/Wisconsin Logon Management System allows authorized individuals to access many DWD Internet applications using a single ID and password. When access to information or services is restricted to protect your privacy or the privacy of others, you will be asked to provide your DWD/Wisconsin Logon and password. Your DWD/Wisconsin Logon and password verifies your identity so that we can provide you with access to your information and services and prevent access by unauthorized individuals.

Customer ID Menu

- :: Self Registration
- :: Profile Management
- :: Password
 - Management
- :: User Acceptance
 Agreement

User Acceptance Agreement

Please note that only certain types of information will be stored in your user profile, as described in the <u>User Acceptance Agreement</u>. Your user profile will never contain records such as driving history, tax information, unemployment compensation, vehicle registrations or prison records.

Sign Up for your DWD/Wisconsin Logon



Self Registration allows you to create **your personal** DWD/Wisconsin Logon. This is your key to doing secure business with DWD over the Internet.

Change / Update Your Information

Profile Management allows you to change your account information, e-mail address and other information.

Change Your Password

Password Management allows you to change your password.

Forgot Your Logon ID or Password?

Logon ID/Password Recovery allows you to recover a forgotten DWD/Wisconsin Logon and/or Password.

Updated November 11, 2003 <u>Administrative Services Division</u> Content Contact: <u>DWD Webmasters</u>

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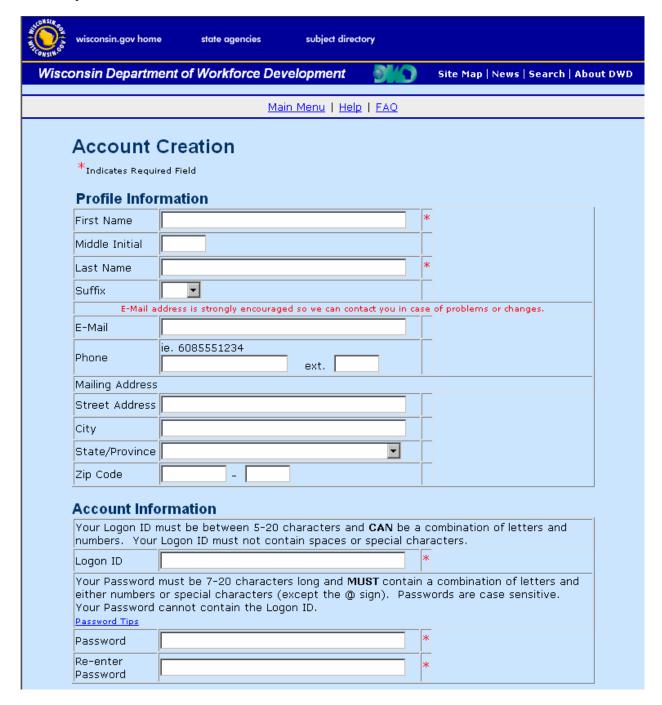
You should now be on the User Agreement Page. This page details the State of Wisconsin's standard user agreement. You must accept this agreement. If you chose to decline, you will be returned to the DWD/Wisconsin Logon Management System Home Page and will not be able to obtain access to the Functional Screen Information Access application.



You're now on Account Creation page. You need to at least enter the required fields (First Name, Last Name, Logon ID, Password, Secret Question, Secret Answer, and Verification Code), which are marked with a red asterisk (*) to the right of text box. The verification code is only used to prevent malicious software from automatically creating accounts. You do not need to remember it beyond this step.

It is recommended that you at least provide an email address in addition to the required fields, so that tech support can easily contact you in the event you experience a problem in the future.

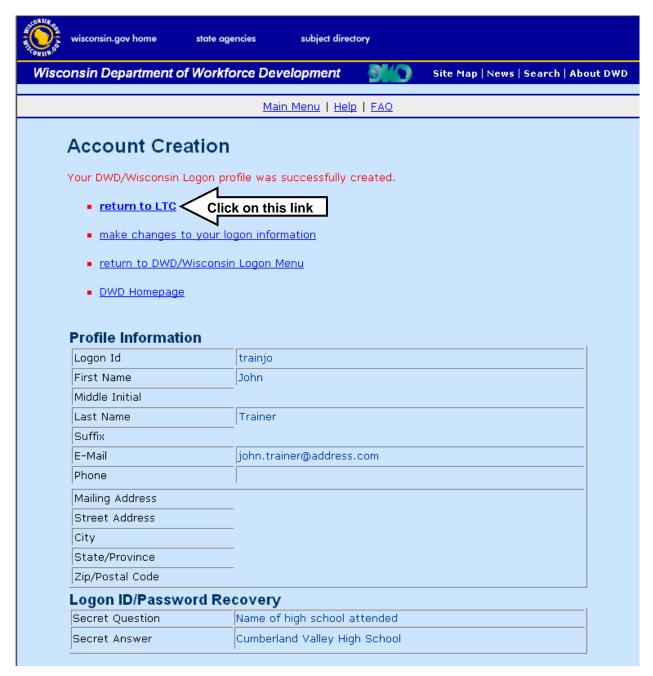
Once complete, click the Submit button.



Password, You <u>Secret Question a</u>	r Secret Question and Secret Answer cannot contain your password. od Answer Tips
Secret Question	*
Secret Answer	*
	prevent automated registrations. the number below <u>click here</u> .
	prevent automated registrations. the number below <u>click here</u> .
57715	Please enter the number as it is shown in the box to the left.

The final page in this process will display the values you have just entered. You can now click on the *Return to LTC* link to return to the Functional Screen Information Access application.

If you notice an error, you can click on Make changes to your logon information link to edit the data.



Your DWD/Wisconsin Logon profile was successfully created.

- return to LTC
- make changes to your logon information
- return to DWD/Wisconsin Logon Menu
- DWD Homepage

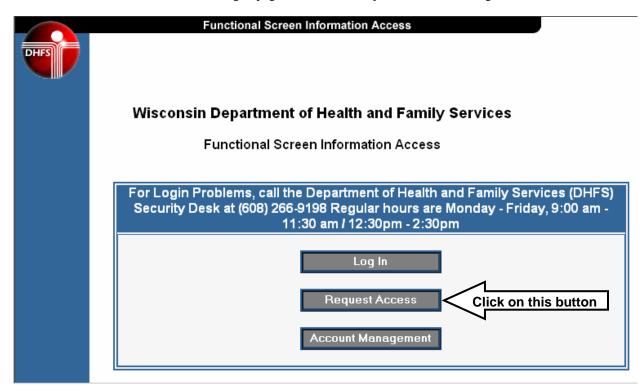
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Note

If you already have a DWD/Wisconsin Logon ID, then you should begin the account creation process here. If you do not have a DWD/Wisconsin Logon ID yet, please return to page 2.

You should now be back on the FSIA Logon page. Click on the Request Access button again.



You're now back on the Request Access page. This time, click on the *Functional Screen Account Request Form* link in Step 2.

Please follow the instructions below to obtain, delete, or change access to the Functional Screen Information Access application

- You must have a DWD/Wisconsin Logon and password. If you have not yet created a DWD/Wisconsin Logon, you will need to do so now. Click here to obtain a DWD/Wisconsin Logon.
- 2. Click on the "Functional Screen Account Request Form" link below to access the Functional Screen Web Access Request Form. After you fill out a series of questions on a Web page, your responses will be automatically transferred to the required form which must be printed from your Web browser. While this Web page will help you complete this form quickly and accurately, please note that your completed form will **not** be transmitted through the Web.



- Make sure that you read the directions carefully and supply all the required information.
- Print the form. The form must be signed by a Supervisor. If you are a certified adult screener, attach a copy of your certificate of completion of the WebCT training course.
- Your Functional Screen Account Request Form will be processed through the state security officers. If you are assigned to more than one agency, then you must fill out a separate form for each agency to which you are assigned. Please fax the completed form to 608-267-2437.

Your request should be processed three days after sending the above form to the local agency. If you are trying to activate a User ID, you can try to access the web site at that time. Your request may have already been processed but the written notice may not have reached you yet.

Note: The information in this system is confidential. You are strongly encouraged to read the Wisconsin Statutes (link is provided below).

Wisconsin Statutes On Confidential Info.

On this page, you will provide the information necessary for the security personnel to create an FSIA account for you. You will need to provide information for all of the required fields, which are indicated by a red asterisk (*) to the right of each textbox.

Item 1 is already completed for you. "Activate User ID for access to Functional Screen Web" is preselected, and the Effective Date has been filled in with the current date.

For User ID, be sure you provide the ID you created during the DWD/Wisconsin

Once you have provided all of the information, click on the *Submit* button.

	FUN	NCTIONAL SCREEN WEB ACCESS REQUEST
		(Please read the information below for instructions.)
1.		for access to Functional Screen Web or access to Functional Screen Web
	Effective Date:	6/3/2004 *
Use	er Information	
2.	User ID: (From DHFS Account Creation Screen)	*
3.	First Name:	* MI:
	Last Name:	*
4.	Social Security Number:	*
5.	Mother's Maiden Name:	*
6.	User's Daytime Phone:	() * Ext:
7.	Are you a certified screener?	- Choose One - 🔻 *
Age	ency Information	
8.	Agency Name:	- Choose One -
9.	Agency Supervisor Name:	*
10.	Supervisor's Phone Number:	()* Ext:

11. Profiles:	* ☐ Agency Administration ☐ Child Screener ☐ Delete ☐ FAQ Administrator ☐ Mental Health Screener ☐ Adult Screener ☐ State Employees ☐ TMG
* Denotes required field.	
	SUBMIT Click on this button

The application has now generated a form based on the answers you provided. You need to print this form, have it signed by your supervisor and yourself, and then fax it the DHFS Security Desk at (608) 267-2437. You will be contacted once they have set up your account

STATE OF WISCONSIN DEPARTMENT OF HEALTH AND FAMILY SERVICES	
Please print this form and return to the State Sec WebCT training course must be attached for a Ce	urity Officer, fax number is 608-267-2437. A certificate of completion of th rtified Adult Screener
FUNCTIONAL S	CREEN WEB ACCESS REQUEST
 Please check one of the following: A Activate User ID for access to Functional Screen Delete User ID for access to Functional Screen Change (Profile, User Name, SSN) 	
Effective Date: 6/3/2004	
Please fill in the following information (All items M	UST be completed):
User Information	
2. User ID (from DHFS Account Creation screen) trainjo	3. User Name (Last, First, MI) Trainer, John
4. Social Security Number 000-55-6232	5. Mother's Maiden Name Mom
6. User's Phone Number (608) 555-3030 ext. 211	7. Certified Screener Yes
Agency Information	
8. Agency Name (Please do not abbreviate.) Aging and Disability Resource Center of Kenosha	County
9. Agency Supervisor Name Kate Supervisor	10. Supervisor's Phone Number (608) 555-3030 ext. 220
11. Profiles Delete, Mental Health Screener	
with Wisconsin Statutes. The User's signature on	to confidential information, which must be safeguarded in accordance this form constitutes acceptance of responsibility for compliance with 2) and with DHFS policy (attached to new logon approvals).
12. User Signature :	Date Signed:
13. Supervisor Signature:	Date Signed :
	Date Signed: